



## Complete Summary

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### TITLE

Oncology: percentage of patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy for whom the planned chemotherapy regimen (which includes, at a minimum: drug[s] prescribed, dose, and duration) is documented prior to the initiation of the new treatment regimen.

### SOURCE(S)

American Society for Therapeutic Radiology and Oncology, American Society of Clinical Oncology, Physician Consortium for Performance Improvement®. Oncology physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Jun. 48 p. [16 references]

## Measure Domain

### PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the [Measure Validity](#) page.

### SECONDARY MEASURE DOMAIN

Does not apply to this measure

## Brief Abstract

### DESCRIPTION

This measure is used to assess the percentage of patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy for whom the planned chemotherapy regimen (which includes, at a minimum: drug[s] prescribed, dose, and duration) is documented prior to the initiation of a new treatment regimen.

### RATIONALE

A detailed plan for the chemotherapy regimen is a critical component of ensuring safety and high quality care for patients.\*

\*The following clinical recommendation statements are quoted verbatim from the referenced clinical guidelines and represent the evidence base for the measure:

American Society of Clinical Oncology (ASCO), "Chemotherapy Treatment Summary," specifies that a treatment plan should include the following information about the planned chemotherapy regimen:

- Chemotherapy regimen and starting dosages
- Duration of treatment and number of planned cycles

## **PRIMARY CLINICAL COMPONENT**

Breast cancer; colon cancer; rectal cancer; chemotherapy regimen

## **DENOMINATOR DESCRIPTION**

All patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy

## **NUMERATOR DESCRIPTION**

Patients for whom the planned chemotherapy regimen (which includes, at a minimum: drug[s] prescribed, dose, and duration) is documented prior to the initiation of a new treatment regimen

**Note:** Abbreviated documentation is acceptable only if: a) there is a standard, written definition for the abbreviation that includes details of the medications, dose and duration, that is physically available at the practice or in the practice EHR/Electronic System or b) the abbreviated documentation includes a reference to a published regimen.

## **Evidence Supporting the Measure**

### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

## **Evidence Supporting Need for the Measure**

### **NEED FOR THE MEASURE**

Unspecified

## **State of Use of the Measure**

### **STATE OF USE**

Current routine use

### **CURRENT USE**

Internal quality improvement  
National reporting

### Application of Measure in its Current Use

#### **CARE SETTING**

Ambulatory Care

#### **PROFESSIONALS RESPONSIBLE FOR HEALTH CARE**

Physicians

#### **LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED**

Individual Clinicians

#### **TARGET POPULATION AGE**

All patients, regardless of age

#### **TARGET POPULATION GENDER**

Either male or female

#### **STRATIFICATION BY VULNERABLE POPULATIONS**

Unspecified

### Characteristics of the Primary Clinical Component

#### **INCIDENCE/PREVALENCE**

Unspecified

#### **ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

#### **BURDEN OF ILLNESS**

Unspecified

#### **UTILIZATION**

Unspecified

#### **COSTS**

Unspecified

## Institute of Medicine National Healthcare Quality Report Categories

### IOM CARE NEED

Getting Better  
Living with Illness

### IOM DOMAIN

Effectiveness  
Safety

## Data Collection for the Measure

### CASE FINDING

Users of care only

### DESCRIPTION OF CASE FINDING

All patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy

### DENOMINATOR SAMPLING FRAME

Patients associated with provider

### DENOMINATOR INCLUSIONS/EXCLUSIONS

#### Inclusions

All patients, regardless of age, with a diagnosis of breast, colon, or rectal cancer who are receiving intravenous chemotherapy

#### Exclusions

None

### RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

### DENOMINATOR (INDEX) EVENT

Clinical Condition  
Therapeutic Intervention

### DENOMINATOR TIME WINDOW

Time window brackets index event

## **NUMERATOR INCLUSIONS/EXCLUSIONS**

### **Inclusions**

Patients for whom the planned chemotherapy regimen (which includes, at a minimum: drug[s] prescribed, dose, and duration) is documented prior to the initiation of a new treatment regimen

**Note:** Abbreviated documentation is acceptable only if: a) there is a standard, written definition for the abbreviation that includes details of the medications, dose and duration, that is physically available at the practice or in the practice EHR/Electronic System or b) the abbreviated documentation includes a reference to a published regimen.

### **Exclusions**

None

## **MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS**

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## **NUMERATOR TIME WINDOW**

Episode of care

## **DATA SOURCE**

Administrative data  
Medical record

## **LEVEL OF DETERMINATION OF QUALITY**

Individual Case

## **PRE-EXISTING INSTRUMENT USED**

Unspecified

## **Computation of the Measure**

## **SCORING**

Rate

## **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

**ALLOWANCE FOR PATIENT FACTORS**

Unspecified

**STANDARD OF COMPARISON**

Internal time comparison

**Evaluation of Measure Properties****EXTENT OF MEASURE TESTING**

Unspecified

**Identifying Information****ORIGINAL TITLE**

Measure #4: plan for chemotherapy documented.

**MEASURE COLLECTION**

[The Physician Consortium for Performance Improvement® Measurement Sets](#)

**MEASURE SET NAME**

[Oncology Physician Performance Measurement Set](#)

**SUBMITTER**

American Medical Association on behalf of the American Society for Therapeutic Radiology and Oncology, the American Society of Clinical Oncology, and the Physician Consortium for Performance Improvement®

**DEVELOPER**

American Society for Therapeutic Radiology and Oncology  
American Society of Clinical Oncology  
Physician Consortium for Performance Improvement®

**FUNDING SOURCE(S)**

Unspecified

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## **FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST**

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

## **INCLUDED IN**

Ambulatory Care Quality Alliance  
Physician Quality Reporting Initiative

## **ADAPTATION**

Measure was not adapted from another source.

## **RELEASE DATE**

2007 Oct

## **REVISION DATE**

2008 Jun

## **MEASURE STATUS**

This is the current release of the measure.

## **SOURCE(S)**

American Society for Therapeutic Radiology and Oncology, American Society of Clinical Oncology, Physician Consortium for Performance Improvement®. Oncology physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2008 Jun. 48 p. [16 references]

## **MEASURE AVAILABILITY**

The individual measure, "Measure #4: Plan for Chemotherapy Documented," is published in the "Oncology Physician Performance Measurement Set." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: [www.physicianconsortium.org](http://www.physicianconsortium.org).

For further information, please contact AMA staff by e-mail at [cqi@ama-assn.org](mailto:cqi@ama-assn.org).

## **NQMC STATUS**

This NQMC summary was completed by ECRI Institute on September 8, 2008. The information was verified by the measure developer on October 16, 2008.

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